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ABSTRACT

This fact sheet, written in both English and Spanish, provides a definition, information on incidence, typical characteristics, and educational implications of emotional disturbance. The definition is from the Individuals with Disabilities Education Act (IDEA) and incidence in 1999-2000 is reported as about 470,000 children and youth. Educational implications include providing emotional and behavioral support, positive behavioral support methodology, and the Individualized Education Program (IEP). The important role of parent support groups is also noted. The fact sheet also lists five print and six organizational resources for further information. (DB)

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National Information Center for Children and Youth with Disabilities

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Emotional Disturbance

✧ Definition ✧

Many terms are used to describe emotional, behavioral, or mental disorders. Currently, students with such conditions are categorized as having an emotional disturbance, which is defined under the Individuals with Disabilities Education Act (IDEA) as follows:

"...a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance—

(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
(B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
(C) Inappropriate types of behavior or feelings under normal circumstances.
(D) A general pervasive mood of unhappiness or depression.
(E) A tendency to develop physical symptoms or fears associated with personal or school problems." [*Code of Federal Regulations*, Title 34, §300.7(c)(4)(i)]

As defined by IDEA at §300.7(c)(4)(ii), emotional disturbance includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance.

✧ Incidence ✧

In the 1999-2000 school year, 470,111 children and youth with emotional disturbance were provided special education and related services in the public schools (*Twenty-third Annual Report to Congress*, U.S. Department of Education, 2001).

✧ Characteristics ✧

The causes of emotional disturbance have not been adequately determined. Although various factors such as heredity, brain disorder, diet, stress, and family functioning have been suggested as possible causes, research has not shown any of these factors to be the direct cause of behavior or emotional problems. Some of the characteristics and behaviors seen in children who have emotional disturbances include:

- Hyperactivity (short attention span, impulsiveness);
- Aggression/self-injurious behavior (acting out, fighting);
- Withdrawal (failure to initiate interaction with others, retreat from exchanges or social interaction, excessive fear or anxiety);
- Immaturity (inappropriate crying, temper tantrums, poor coping skills); and
- Learning difficulties (academically performing below grade level).

Children with the most serious emotional disturbances may exhibit distorted thinking, excessive anxiety, bizarre motor acts, and abnormal mood swings. Some are identified as children who have severe psychosis or schizophrenia.

Many children who do not have emotional disturbance may display some of these same behaviors at various times during their development. However, when children have an emotional disturbance, these behaviors continue over long periods of time. Their behavior signals that they are not coping with their environment or peers.

✧ Educational Implications ✧

The educational programs for children with an emotional disturbance need to include attention to providing emotional and behavioral support as well as helping them to master academics, develop social skills, and increase self-awareness, self-control, and self-esteem. A large body of research exists regarding methods of providing students with positive behavioral support (PBS) in the school environment, so that problem behaviors are minimized and positive, appropriate behaviors are fostered. (See the resource list at the end of this publication for more information on PBS.) It is also important to know that, within the school setting:

- For a child whose behavior impedes learning (including the learning of others), the team developing the child's Individualized Education Program

(IEP) needs to consider, if appropriate, strategies to address that behavior, including positive behavioral interventions, strategies, and supports.

- Students eligible for special education services under the category of emotional disturbance may have IEPs that include psychological or counseling services. These are important related services which are available under law and are to be provided by a qualified social worker, psychologist, guidance counselor, or other qualified personnel.

- Career education (both vocational and academic) is also a major part of secondary education and should be a part of the transition plan included in every adolescent's IEP.

There is growing recognition that families, as well as their children, need support, respite care, intensive case management, and a collaborative, multi-agency approach to services. Many communities are working toward providing these wrap-around services. There are a growing number of agencies and organizations actively involved in establishing support services in the community.

✧ Other Considerations ✧

Families of children with an emotional disturbance may need help in understanding their children's condition and in learning how to work effectively with them. Parent support groups can be helpful in this regard. Organizations such as the National Mental Health Association (NMHA) and the National Alliance for the Mentally Ill (NAMI) have parent groups in every state. (See "Organizations" below.) Help is also available from psychiatrists, psychologists, or other mental health professionals in public or private mental health settings. Children should be provided services based on their individual needs, and all persons who are involved with these children should be aware of the care they are receiving. It is important to coordinate all services between home, school, and therapeutic community with open communication.

✧ Resources ✧

Greene, R.W. (2001). *The explosive child: A new approach for understanding and parenting easily frustrated chronically inflexible children*. New York: Harper Collins. (Telephone: 212-207-7000. Web: www.harpercollins.com/hc/home.asp)

Jordan, D. (2000). *A guidebook for parents of children with emotional or behavior disorders* (2nd ed.). Minneapolis, MN: PACER. (Telephone: 888-248-0822. Web: www.pacer.org)

Koplewicz, H.S. (1997). *It's nobody's fault: New hope and help for difficult children*. New York: Three Rivers Press. (To find a local or online bookseller, go to: www.randomhouse.com/reader_resources/ordering.html)

Miller, J.A. (1999). *The childhood depression sourcebook*. New York: McGraw-Hill. (Telephone: 877-833-5524. Web: http://books.mcgraw-hill.com)

Papolos, D., & Papolos, J. (2000). *The bipolar child*. New York: Broadway. (To find a local or online bookseller, go to: www.randomhouse.com/reader_resources/ordering.html)

Wilen, T.E. (1998). *Straight talk about psychiatric medications for kids*. New York: Guilford. (Telephone: 800-365-7006. Web: www.guilford.com)

✧ Organizations ✧

American Academy of Child and Adolescent Psychiatry Public Information Office, 3615 Wisconsin Ave., NW, Washington, DC 20016; 202-966-7300. Web: www.aacap.org.

Center on Positive Behavioral Interventions and Supports, 1235 College of Education, 1761 Alder Street, Eugene, OR 97403; 541-346-2505. E-mail: pbis@oregon.uregon.edu. Web: www.pbis.org.

ERIC Clearinghouse on Disabilities and Gifted Education, Council for Exceptional Children, 1110 N. Glebe Road, Suite 300, Arlington, VA 22201-5704; 800-328-0272 (V/TTY). E-Mail: ericec@cec.sped.org. Web: http://ericec.org.

Federation of Families for Children's Mental Health, 1101 King Street, Suite 420, Alexandria, VA 22314; 703-684-7710. E-Mail: ffcmh@ffcmh.org. Web: www.ffcmh.org

National Alliance for the Mentally Ill (NAMI), Colonial Place Three, 2107 Wilson Boulevard, Suite 300, Arlington, VA 22201-3042; 703-524-7600; 703-516-7227 (TTY); 800-950-6264. E-mail: namiofc@aol.com. Web: www.nami.org

National Mental Health Association, 2001 N. Beauregard Street, 12th Floor, Alexandria, VA 22311; 703-684-7722; 800-969-6642; 800-433-5959 (TTY). E-mail: nmhainfo@aol.com. Web: www.nmha.org.

FS5, August 2002

IDEAs that Work — U.S. Office of Special Education Programs

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Problemas Emocionales

✧ Definición ✧

Hay muchos términos para describir problemas emocionales, mentales o del comportamiento. En la actualidad, éstos están calificados de "problemas emocionales serios" (serious emotional disturbance). De acuerdo a las regulaciones de la Ley Pública 101-476, el Acta para la Educación de Individuos con Discapacidades (IDEA), los problemas emocionales serios se definen como "una condición que exhibe una o más de las siguientes características a través de un largo período de tiempo y hasta cierto grado, lo cual afecta desfavorablemente el rendimiento educacional del niño:

(A) Una incapacidad de aprender, que no puede explicarse mediante factores intelectuales, sensoriales, o de la salud;

(B) Una incapacidad de formar o mantener relaciones interpersonales con los compañeros y profesores;

(C) Comportamiento o sentimientos inapropiados, bajo circunstancias normales;

(D) Un estado general de descontento o depresión; o

(E) Una tendencia a desarrollar síntomas físicos o temores asociados con los problemas personales o colegiales." [*Código de Regulaciones Federales, Título 34, Sección 300.7(b)(9)*]

La definición Federal (tal como aparece en el *Código de Regulaciones Federales*) incluye a los niños con esquizofrenia. Los niños que se han identificado como socialmente malajustados (con excepción de los niños con problemas emocionales serios) son excluídos de esta categoría.

Es importante saber que el gobierno Federal de los Estados Unidos está analizando la manera en la cual se define un problema emocional serio, y esta definición podría ser revisada.

✧ Incidencia ✧

Para el año escolar desde 1998 a 1999, unos 463,172 niños y jóvenes con problemas emocionales serios recibieron servicios en las escuelas públicas de los Estados Unidos (Departamento de Educación de los Estados Unidos, 2000).

✧ Características ✧

Hasta el momento, las causas de los problemas emocionales no han sido adecuadamente determinadas. Aunque algunas causas pueden incluir factores tales como la herencia, desórdenes mentales, dieta, presiones, y el funcionamiento familiar, ningún estudio ha podido demostrar que alguno de estos factores sea la causa directa de los problemas del comportamiento. Algunas de las características y comportamientos típicos de los niños con problemas emocionales incluyen:

- La hiperactividad (la falta de atención, impulsividad);
- Agresiones/un comportamiento que puede resultar en heridas propias;
- Retraimiento (falta de iniciar intercambios con los demás; el retiro de los intercambios sociales; temores o ansiedades excesivas);
- Inmadurez (el niño llora en ocasiones inapropiadas; temperamento; habilidad inadecuada de adaptación);
- Dificultades en el aprendizaje (rendimiento académico por debajo del nivel correspondiente al grado).

Los niños con los problemas emocionales más serios pueden exhibir un pensamiento distorcionado, ansiedad, actos motrices raros, y un temperamento demasiado variable. A veces son identificados como niños con una psicósis severa o esquizofrenia.

Muchos niños que no tienen un problema emocional pueden experimentar algunos de estos comportamientos durante diferentes etapas de su desarrollo. Sin embargo, cuando los niños tienen serios problemas emocionales, este tipo de comportamiento continúa a través de largos períodos de tiempo. Su comportamiento nos indica que no están bien dentro de su ambiente o entre sus compañeros.

✧ Implicaciones Educacionales ✧

Los programas educacionales para los niños con problemas de comportamiento o emocionales deben incluir atención en los ramos académicos, el desarrollo de habilidades sociales, un mayor control, y amor propio. Los programas de preparación profesional, tanto vocacionales como académicos, constituyen una parte principal de la educación secundaria de estos niños. Se recomienda que la preparación profesional sea considerada como parte del Programa Educativo Individualizado ("Individualized Education Program," o IEP) de cada adolescente.

La modificación o control de comportamiento mediante refuerzos positivos es uno de los métodos más comunes para ayudar a los niños con problemas emocionales o del comportamiento. Sin embargo, hay muchos otros métodos que también han sido exitosos y pueden ser usados junto con la modificación de la conducta. Estos incluyen la Intervención del Espacio Ambiental y la Resolución de Conflictos.

Los Programas Educativos Individualizados (IEP) de los alumnos que son elegibles para recibir servicios de educación especial bajo la categoría de problemas emocionales serios pueden incluir servicios psicológicos o de asesoramiento. Estos importantes servicios relacionados están disponibles bajo ley y deben ser provistos por un trabajador social, psicólogo, consejero escolar, u otro personal calificado.

Hoy en día se reconoce que tanto las familias como los niños necesitan apoyo, cuidado para dar respiro a los padres, servicios intensivos para el manejo del caso, y un plan de tratamiento que incluya la participación de varias agencias. Muchas comunidades están preparándose para proveer estos servicios, y cada día más agencias y organizaciones trabajan para establecer servicios de apoyo en la comunidad. Los grupos de apoyo para padres también son importantes, y ciertas organizaciones tales como Federation of Families for Children's Mental Health y el National Alliance for the Mentally Ill (NAMI) tienen representantes y grupos en cada estado. Las direcciones y números de estas organizaciones se encuentran bajo la sección de recursos.

✧ Otras Consideraciones ✧

Las familias de niños con problemas emocionales pueden necesitar ayuda para comprender la condición de su niño y aprender a trabajar efectivamente con él o ella. Pueden recibir ayuda de psiquiatras, psicólogos u otros profesionales en salud mental que trabajan en el sector público o privado. Los niños deben recibir servicios basados en sus necesidades individuales, y todas las personas que trabajan con ellos deben estar al tanto del cuidado que están recibiendo. Es importante coordinar todos los servicios entre hogar, escuela, y comunidad terapéutica, manteniendo abiertas las vías de comunicación.

✧ Organizaciones ✧

American Academy of Child and Adolescent Psychiatry, Public Information Office, 3615 Wisconsin Avenue N.W., Washington, DC 20016. Teléfono: (202) 966-7300. Publicaciones en español. Web: www.aacap.org

Federation of Families for Children's Mental Health, 1021 Prince Street, 3rd Floor, Alexandria, VA 22314-2971. Teléfono: (703) 684-7710. Información en español. Correo electrónico: ffcmh@ffcmh.org
Web: www.ffcmh.org

National Alliance for the Mentally Ill (NAMI), Colonial Place Three, 2107 Wilson Boulevard, Suite 300, Arlington, VA 22201-3042. Teléfono: 1-800-950-6264; (703) 524-7600; (703) 516-7227 (TTY). Publicaciones en español, incluyendo: *La Depresión Severa; La Esquizofrenia; Nuevas Opciones para el Tratamiento del Trastorno Bipolar; Trastorno de Pánico; Trastorno Obsesivocompulsivo.* Disponible en: www.nami.org/helpline/helpline.html
Correo electrónico: namiofc@aol.com
Web: www.nami.org

National Mental Health Association, 1021 Prince Street, Alexandria, VA 22314-2971. Teléfono: (800) 969-6642; (703) 684-7722; (800) 433-5959 (TTY). Información en español. Correo eléctronic: nmhainfo@aol.com
Web: www.nmha.org

National Institute of Mental Health, Information Resources & Inquiries Branch, 6001 Executive Boulevard, Room 8184, MSC 9663, Bethesda, MD 20892-9663. Teléfono: (301) 443-4513. Correo eléctronico: nimhinfo@nih.gov
Web: www.nimh.nih.gov. Publicaciones en español, incluyendo: *Depresión; Trastornos de Ansiedad; Trastorno de Pánico; Trastorno Obsesivo-Compulsivo; Una Enfermedad Real: Trastorno de Comportamiento Obsesivo Compulsivo (OCD)* . Disponible en: www.nimh.nih.gov/publicat/spanishpub.cfm

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